

Application Data Sheet

Application Information

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: SAWTOOTH SPLINE DISPLAY

Attorney Docket Number:: 021751-005600US

Request for Early Publication:: No

Request for Non-Publication:: No

Suggested Drawing Figure:: 3

Total Drawing Sheets:: 2

Small Entity?:: No

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Robert
Middle Name:: G.
Family Name:: Podesta
Name Suffix::
City of Residence:: Oakland
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 70 Rio Vista Avenue
City of Mailing Address:: Oakland
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94611

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Scott
Middle Name:: P.
Family Name:: Clark
Name Suffix::
City of Residence:: San Francisco
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 283 Clinton Park
City of Mailing Address:: San Francisco
State or Province of mailing address:: CA

Country of mailing address:: US
Postal or Zip Code of mailing address:: 94611

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Christopher
Middle Name:: R.
Family Name:: Schoeneman
Name Suffix::
City of Residence:: Berkeley
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 91 Eucaplyptus Road
City of Mailing Address:: Berkeley
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94705

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Timothy
Middle Name:: S.
Family Name:: Milliron
Name Suffix::
City of Residence:: Bekerkey
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 1417 Kains Avenue
City of Mailing Address:: Bekerkey

State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94702

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

Assignee Information

Assignee Name:: Pixar
Street of mailing address:: 1200 Park Avenue
City of mailing address:: Emeryville
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94608